

APPLICATION FOR NEW AND/OR TRANSFERRED MUNICIPAL AND LAW ENFORCEMENT LICENSE PLATES

State Form 53565 (4-08) Indiana Bureau of Motor Vehicles

To transfer an existing License Plate

INSTRUCTIONS:

- 1. Complete application with all information in sections 1, 2, 3, and 4 as applicable.
- 2. Attach additional sheets if necessary for information for each vehicle for which a municipal or law enforcement license plate is requested.
- 3. The application <u>must</u> be accompanied by a copy of <u>each</u> vehicle(s) title, title application, or lease agreement.

Please submit all Applications to:

Indiana Bureau of Motor Vehicles

Registration Division-Special Plates 100 N. Senate Ave., N404

Indianapolis, IN 46204 Telephone: (317) 233-3148 Fax number: (317) 233-0053 Internet: http://www.myhmy.in.gov

SECTION 1. APPLICANT INFORMATION						
Official Name of entity that owns or leases the vehicle(s)		Entity Telephone number		Entity's Executive Officer's name and title		
		()				
Entity street address (number and street)		City		County		Zip Code
					Indiana	
State Board of Accounts number	Federal I.D. number				l	1
	SE	ECTION 2. VEHICLE	INFORMATION			
(List the follow	ing information for each v			forcement license pl	late is requested)	
(1) VEHICLE			·			
VIN	Vehicle color	Vehicle color Vehicle type Vehicle Description (e.g. Passenger, truck, motorcycle, school bus, (Make, model, Year				
(of New Vehicle or Vehicle that Municipal License Plate will be					(Make, me	odei, Year)
transferred to)	city bus, trailer, semi-trailer, recreational vehicle)					
Basis of Financial Responsibility	Description of official	business for which t	he entity will us	se the vehicle	Vehicle purch	nase or lease date
(Source of self-insurance; or Insurance Company Name and					(mon	th, day, year)
Policy number)						
, , , , ,						
The application is for (check one):			If a Transfer, \	/IN of Vehicle from	which the Licen	se Plate is
			Transferred			
A new Municipal or Law Enfo	orcement License Plate					
To transfer an existing Licer	se Plate					
(2) VEHICLE						
VIN	Vehicle color	Vehicle type		Vehicle Description		
(of New Vehicle or Vehicle that	(e.g. Passenger, truck, motorcycle, school bu			(Make, model, Year)		
Municipal License Plate will be transferred to)		city bus, trailer, sen	nı-trailer, recreat	ional vehicle)		
transierred to)						
					T	
Basis of Financial Responsibility (Source of self-insurance; or	Description of official	business for which t	he entity will us	se the vehicle	Vehicle purchase or lease date (month, day, year)	
Insurance Company Name and					(IIIOII	iri, uay, year)
Policy number)						
The application is for (about one).		1	If a Transfer \	(INL of Valsials from	bish Lisansa F	Nata in Tunnafaunad
The application is for (check one):	n is for (check one): If a Transfer, VIN of Vehicle from which License Plate is Transferred					
A new Municipal or Law Enfo	orcement License Plate					
To transfer an existing Licer	se Plate					
(3) VEHICLE	ise riale					
VIN	Vehicle color	V	ehicle type		Vehicle D	escription
(of New Vehicle or Vehicle that		(e.g. Passenger, tr			(Make, m	odel, Year)
Municipal License Plate will be		city bus, trailer, sen	ni-trailer, recreat	ional vehicle)		
transferred to)						
Basis of Financial Responsibility	Description of official	business for which t	he entity will us	se the vehicle		nase or lease date
(Source of self-insurance; or Insurance Company Name and	(month, day, year)			tn, day, year)		
Policy number)						
·						
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The application is for (check one): If a Transfer, VIN of Vehicle from which License Plate			riate is Transferred			
A new Municipal or Law Enfo	orcement License Plate					

(4) VEHICLE					
VIN (of New Vehicle or Vehicle that Municipal License Plate will be transferred to)	Vehicle color	Vehicle type (e.g. Passenger, truck, motorcycle, school bus, city bus, trailer, semi-trailer, recreational vehicle)		Vehicle Description (Make, model, Year)	
Basis of Financial Responsibility (Source of self-insurance; or Insurance Company Name and	Description of official business for which the entity will use the vehicle			Vehicle purchase or lease date (month, day, year)	
Policy number)					
The application is for (check one):			If a Transfer, VIN of Vehicle from	which License Plate is Transferred	
A new Municipal or Law Enf					
To transfer an existing Lice (5) VEHICLE	ise Plate				
VIN (of New Vehicle or Vehicle that Municipal License Plate will be transferred to)	Vehicle color	V (e.g. Passenger, to city bus, trailer, ser	Vehicle Description (Make, model, Year)		
Basis of Financial Responsibility (Source of self-insurance; or Insurance Company Name and Policy number)	Description of official business for which the entity will use the vehicle			Vehicle purchase or lease date (month, day, year)	
The application is for (check one):			If a Transfer, VIN of Vehicle from	which License Plate is Transferred	
A new Municipal or Law Enforcement License Plate					
To transfer an existing Lice	nse Plate				
(6) VEHICLE					
VIN (of New Vehicle or Vehicle that Municipal License Plate will be transferred to)	Vehicle color	(e.g. Passenger, ti	ruck, motorcycle, school bus, mi-trailer, recreational vehicle)	Vehicle Description (Make, model, Year)	
Basis of Financial Responsibility (Source of self-insurance; or Insurance Company Name and Policy number)				Vehicle purchase or lease date (month, day, year)	
The application is for (check one):			If a Transfer, VIN of Vehicle from	which License Plate is Transferred	
A new Municipal or Law Enf					
To transfer an existing Licer (7) VEHICLE	nse Plate				
VIN	Vehicle color	V	ehicle type	Vehicle Description	
(of New Vehicle or Vehicle that					
Municipal License Plate will be transferred to)		(e.g. Passenger, ti	ruck, motorcycle, school bus, mi-trailer, recreational vehicle)	(Make, model, Year)	
Municipal License Plate will be transferred to) Basis of Financial Responsibility (Source of self-insurance; or		(e.g. Passenger, to city bus, trailer, ser	ruck, motorcycle, school bus,	(Make, model, Year) Vehicle purchase or lease date (month, day, year)	
Municipal License Plate will be transferred to) Basis of Financial Responsibility		(e.g. Passenger, to city bus, trailer, ser	ruck, motorcycle, school bus, mi-trailer, recreational vehicle)	Vehicle purchase or lease date	
Municipal License Plate will be transferred to) Basis of Financial Responsibility (Source of self-insurance; or Insurance Company Name and Policy number)		(e.g. Passenger, to city bus, trailer, ser	ruck, motorcycle, school bus, mi-trailer, recreational vehicle) the entity will use the vehicle	Vehicle purchase or lease date (month, day, year)	
Municipal License Plate will be transferred to) Basis of Financial Responsibility (Source of self-insurance; or Insurance Company Name and	Description of official l	(e.g. Passenger, to city bus, trailer, ser	ruck, motorcycle, school bus, mi-trailer, recreational vehicle) the entity will use the vehicle	Vehicle purchase or lease date	

SECTION 3. ENTITY CLASSIFICATION					
The entity shall indicate which one (1) of the following classifications the entity belongs, thus entitling the entity to a permanent municipal license plate. The entity must also submit the following requested written documentation or meet the requirements that establish that the entity meets the classification for which it qualifies for a municipal or law enforcement license plate. Please check one (1):					
1. The State of Indiana					
a) a state agency,					
b) a state university, or					
c) other state entity					
2. A municipal corporation (as defined in IC 3	6-1-2-10) "Municipal corporation" means any of the following	g:			
a) a county, city, town, or township,					
b) school corporation (Must be	b) school corporation (Must be listed as a school corporation with the Indiana Board of Education),				
c) library district (Must be	c) library district (Must be listed as a library with the Indiana State Library),				
d) local housing authority (Must p	(Must provide a certified copy of the ordinance(s) that establishes the authority),				
e) fire protection district (Must be	e) fire protection district (Must be listed with the Indiana State Fire Marshall or Indiana Department of Homeland Security),				
f) public transportation corporation (/	Must provide a certified copy of the ordinance(s) that establish	shes the corporation),			
g) local building authority (Must p	rovide a certified copy of the resolution or ordinance(s) that	establishes the authority),			
h) local hospital authority or corporatio	n (Must provide a certified copy of the resolution or ordi	inance(s) that establishes the authority),			
i) local airport authority (Must p	rovide a certified copy of the resolution or ordinance(s) that	establishes the authority),			
j) special service district (Must µ	provide a certified copy of the resolution or ordinance(s) that	t establishes the district),			
k) other separate local governmental e	entity that may sue and be sued (Must provide a certified establishes the entity)	copy of the statute, ordinance or resolution that			
3. A volunteer fire department (as defined in IC 36-8-12-2) (Must be listed with the Indiana State Fire Marshall or Department of Homeland Security and provide a copy of the contract or resolution to provide firefighting services for a county, city, town, or township.)					
4. A volunteer emergency ambulance service that meets the requirements of IC 16-31 and has only members that serve for no compensation or a nominal annual compensation of not more than \$3,500.00. (Must be registered as a Volunteer Emergency Ambulance Service with the Indiana Emergency Medical Services and provide an official letter from the Indiana Emergency Medical Services Commission.)					
5. A rehabilitation center funded under IC 12-12 (Must be listed as a rehabilitation center with the Indiana Rehabilitation Bureau and provide a letter from the Indiana Rehabilitation Bureau of the FSSA.)					
6. A community action agency (IC 12-14-23) (Must be designated by the Governor or under Federal law as a community action agency.)					
7. An area agency of aging and the aged (IC 12-10-1-6) and a county council on aging that is funded through an area agency (Must provide a copy of the contract with the Bureau of Aging and In-Home Services.)					
8. A community mental health center (IC 12-29-2) (Must provide a copy of the Division of Mental Health and Addiction's certificate to operate in Indiana as a community mental health center.)					
For Law Enforcement License Plate (only available to these entities pursuant to IC 9-19-3-6): (Must provide official identification showing the representative is employed with the entity.)					
9. The Indiana State Police Department					
10. The Indiana Department of Natural Resources					
11. A county police department					
12. A city or town police department					
SECTION 4. AFFIRMATION AND SIGNATURE The authorized representative submitting this application swears or affirms under the penalty of perjury that the answers and information contained in this					
application are true and correct, that the entity for which this application is made owns or leases the above listed vehicle(s) and uses it for official business pursuant to IC 9-18-3-1. A municipal license plate issued to a vehicle shall be permanently attached to the vehicle listed in this application in accordance with IC 9-18-3-4.					
Date (month, day, year)	Signature of authorized entity representative				
Typed or printed title of entity representative	Typed or printed name of entity representative	Office telephone number of entity representative ()			

FOR BMV OFFICE USE ONLY:					
Reviewed By:		Date Reviewed (month, day, year)			
Application is:					
Approved Denied	Additional Information Needed (see below)				
Comments/Additional Information Needed:					
	For Approved Applications:				
VIN (of Vehicle Receiving License Plate)	License Plate Number Issued/Transferred	MO License Plate Account Number			
1.					
2.					
3.					
4.					
5.					
6.					
7.					